Washington Historic Preservation Commission Application for Certificate of Review

| Address of subject property | | |
|--|---|-------|
| Business name (if applicable) | | |
| Property owner name | | |
| Address | | |
| Phone number | Email address | |
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| | | |
| Phone number | Email address | |
| Is this man are larged in the Design | Davison and 2 = 100 an = 10 | |
| Is this property located in the Design Is this property located in a National | Register Historic District? yes or no If so, which or | n e ? |
| is this property located in a National | Register Pristoric District: yes or no ir so, which or | IC; |
| □ Downtown Historic | District | |
| □ Tibbe District | □ Stafford-Olive District | |
| □ Brehe Farmstead Di | istrict 🗆 John B. Busch Brewery Distri | .ct |
| Briefly describe property as it currently | ly exists and enclose photographs of existing structure(s) |): |
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| | | |
| Type of Improvement | | |
| 0. | ddition, etc.) □ Rehabilitate or restore □ Sign □ Demoli vood repair, etc.) □ Other | ition |
| | <u> </u> | |
| | MUST INCLUDE materials, colors, design and placem features. Attach a copy of elevations, if applicable, and | |
| rendering of proposed changes. | | |
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| | | |
| Applicant signature | Date | |